

04-12-07  
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25291 7590 01/25/2007

WYETH  
PATENT LAW GROUP  
5 GIRALDA FARMS  
MADISON, NJ 07940

04/13/2007 WASFAW2 00000014 011425 10772799

01 FC:1501 1400.00 DA  
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<b>Cecilia Chessell</b>	(Depositor's name)
<i>Cecilia Chessell</i>	(Signature)
<b>April 11, 2007</b>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/772,799	02/05/2004	Jonathan David Bloom	AM 100816	5217
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TITLE OF INVENTION: ISOXAZOLE-CONTAINING THIOUREA INHIBITORS USEFUL FOR TREATMENT OF VARICELLA ZOSTER VIRUS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional	NO	\$1400	\$300	\$0	\$1700	04/25/2007
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EXAMINER	ART UNIT	CLASS-SUBCLASS
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LE, EMILY M	1648	514-378000
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Joseph M. Mazzarese**

2 \_\_\_\_\_

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**Wyeth Holdings Corp.**

**Madison, New Jersey 07940**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies **5**

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- ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number **01-1425** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *Joseph M. Mazzarese*

Date **April 11, 2007**

Typed or printed name **Joseph M. Mazzarese**

Registration No. **32,803**

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